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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	15818-4US JA/AD/mb
	First Inventor	Jean-Marc Perot et al.
	Title	SYSTEM AND METHOD FOR VIRTUAL ARTICULATOR
	Express Mail Label No.	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450
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1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>19</u>] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix. - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>12</u>] 5. Oath or Declaration [Total Pages <u> </u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76.	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
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ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. 3.73 (b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. <input checked="" type="checkbox"/> Other: <u>(Unsigned Declaration)</u>

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an application Data Sheet under 37 CFR 1.76:

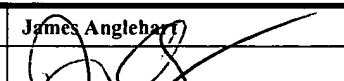
☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: PCT/CA02/00904

Prior application information: Examiner

Group / Art Unit:

For **CONTINUATION** or **DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number Label		20988 (Insert Customer No. here)		or <input type="checkbox"/> Correspondence address below	
Name					
Address					
City	State	Postal Code or Zip Code			
Country	Telephone	Fax			

Name (Print/Type)	James Anglehart	Registration No. (Attorney/Agent)	38,796
Signature		Date	December 12, 2003

22154 U.S. PTO 10734263





16698 U.S. PTO

121503

PTO/SB/17 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 477.00)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Jean-Marc Perot et al.
Examiner Name	
Art Unit	
Attorney Docket No.	15818-4US JA/AD/mb

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None
☐ Deposit Account:

Deposit Account Number 19-5113

Deposit Account Name OGILVY RENAULT

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments
☒ Charge any additional fee(s) or any underpayment of fee(s)
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	770	2001	385	Utility filing fee	385.00
		1002	340	2002	170	Design filing fee	
		1003	530	2003	265	Plant filing fee	
		1004	770	2004	385	Reissue filing fee	
		1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)							385.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
23	- 20**= 3	X 9.00	= 27.00
Independent Claims	3	- 3**= 0	X =
Multiple Dependent			=

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
		1202	182	2202	9	Claims in excess of 20
		1201	86	2201	43	Independent claims in excess of 3
		1203	290	2203	145	Multiple dependent claim, if not paid
		1204	86	2204	43	** Reissue independent over original patent
		1205	182	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 27.00)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	65.00
1052	50	2052	25			Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	110	2251	55			Extension for reply within first month	
1252	420	2252	210			Extension for reply within second month	
1253	950	2253	475			Extension for reply within third month	
1254	1,480	2254	740			Extension for reply within fourth month	
1255	2,010	2255	1,005			Extension for reply within fifth month	
1401	330	2401	165			Notice of Appeal	
1402	330	2402	165			Filing a brief in support of an appeal	
1403	290	2403	145			Request for oral hearing	
1451	1,510	1451	1,510			Petition to institute a public use proceeding	
1452	110	2452	55			Petition to revive - unavoidable	
1453	1,330	2453	665			Petition to revive - unintentional	
1501	1,330	2501	665			Utility issue fee (or reissue)	
1502	480	2502	240			Design issue fee	
1503	640	2503	320			Plant issue fee	
1460	130	1460	130			Petitions to the Commissioner	
1807	50	1807	50			Petitions related to provisional applications	
1806	180	1806	180			Submission of Information Disclosure Stmt	
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	770	2809	385			Filing a submission after final rejection(37 CFR § 1.129(a))	
1810	770	2810	385			For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	

Other fee (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 65.00)

SUBMITTED BYName (Print/Type) James Anglehart
SignatureRegistration No. 38,796
(Attorney/Agent)**Complete (if applicable)**Telephone 514-847-4244
Date December 12, 2003